Moorfields Eye Hospital NHS Foundation Trust

NHS

Using data to inform & improve eye care

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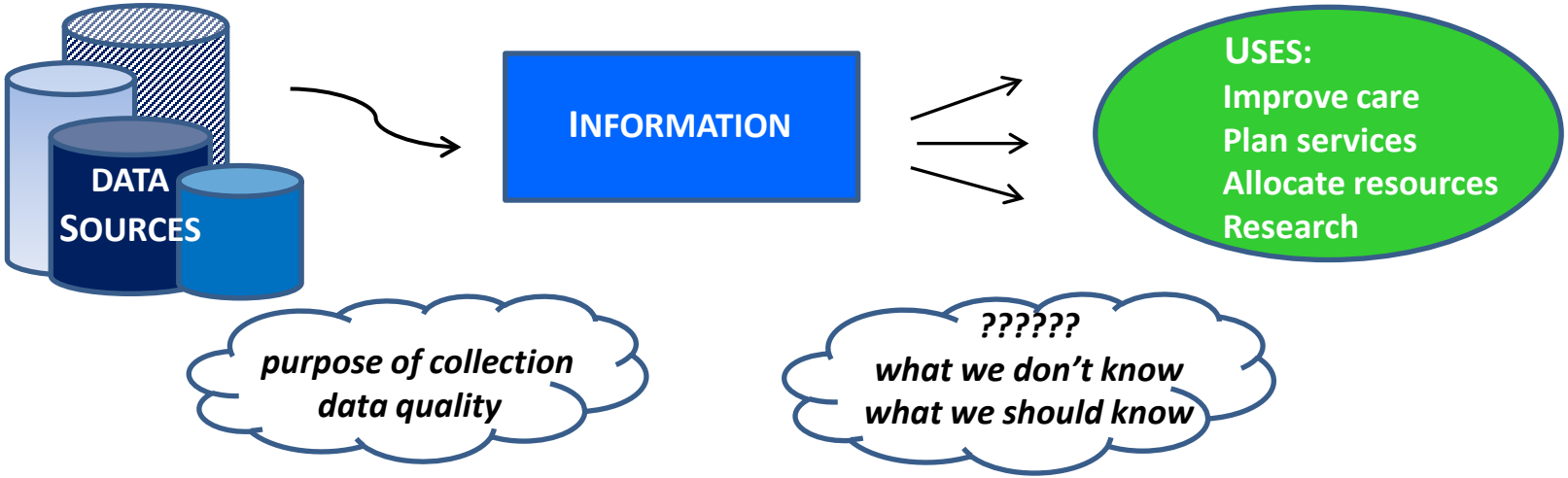
Using data to inform & improve eye care



- Who is at risk of poor eye health?
- Variations in eye health service activity
- Reporting on disparities (variations and inequalities)

POPULATION at RISK of POOR EYE HEALTH – England.

REGION	RISK FACTOR INDICATORS				
	% Adults Overweight or Obese 2021-22*. C16	% Physically Active Adults 2021-22*. C17a	% Adults Self-reported Smokers 2022**. C18	% estimated Diabetes Diagnosis Rate 2018. C22	Crude Rate New CVI / 10^5 2021-22#. E12d
North East	70.5	65.4	14.8	82.5	47.1
York & Humber	66.5	66.1	14.1	81.9	46.1
West Midlands	67.2	63.4	13.8	86.3	41.7
East Midlands	67	66.3	13.4	84.6	42.1
North West	66.7	65.2	14.4	81.1	41.4
East England	63.9	68	12.9	76.7	34.3
South West	62.8	71.7	12.6	74	43.7
South East	62.7	70.5	11.9	75.2	39.1
London	**55.9**	**66.8**	**11.7**	**71.4**	**32**
	(44.2 to 70.5)	(74.3 to 58.4)	(6.2 to 16.3)	(89.1 to 54.3)	(22.3 to 47.5)
ENGLAND	**63.8**	**67.3**	**12.7**	**78**	**39.9**

RISK OF POOR GENERAL HEALTH EYE HEALTH

SOURCE:
Public Health Outcomes Framework C. Health Improvement. E. Healthcare & Premature Mortality

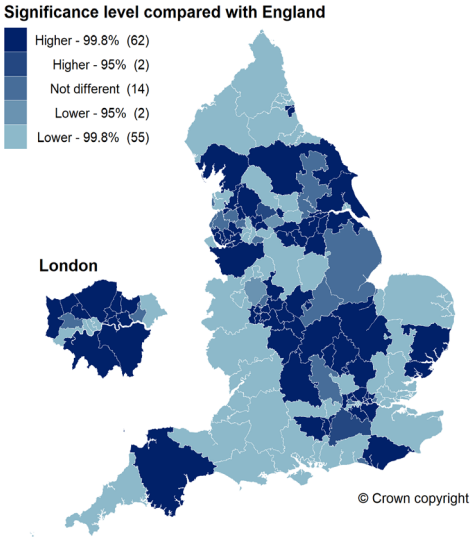
* Active Lives Adult Survey, Sport England
** Annual Population Survey (APS)
# All Types CVI, All Cause, All Ages

Legend:

better than England
similar to England
worse than England

Vision OUT-PATIENT (OPD) Attendances England: 2019-20

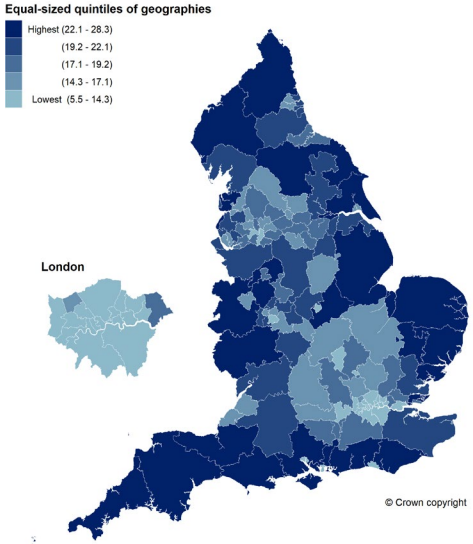
ALL PERSON-based OPD attendances (DSR) All Ages by CCG, England: 2019/20



England: 5,969 per 100,000 population

CCG range: 4,404 to 8,248 per 10^5 pop'n
a 1.9-fold variation

% GP Registere'd Population >=65yr, by CCG, England: 2020



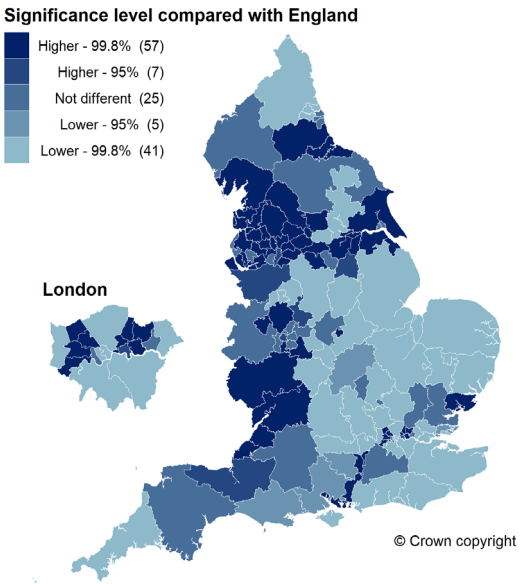
56% people attending Vision OPD >=65yrs

1 in 4 people in 85-89 year age group had Vision OPD attendance (England) in 2019-20

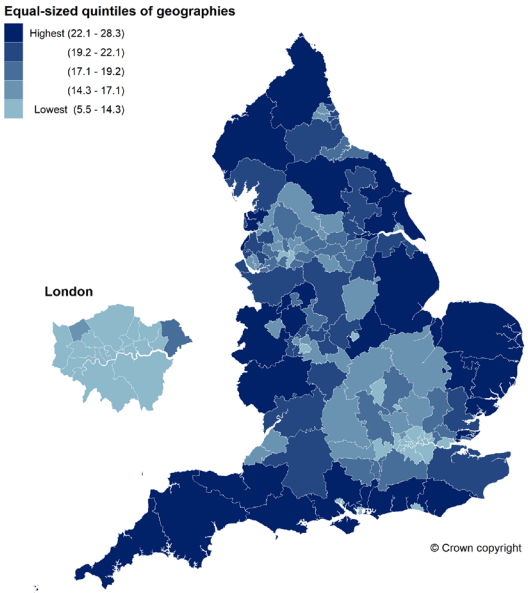
Source:
Atlas of variation in risk factors and health care for vision in England. OHID 2021

CATARACT SURGERY – admissions by CCG, England: 2019/20

ALL Cataract Operations (DSR) >=65yrs by CCG, England: 2019-20.



% GP Registered Population >= 65 yr by CCG, England: 2020



England : 3660 per 100,000 population

CCG range: 2,462 to 5,299 per 10^5 population
a **2.2-fold variation**

- **85% of cataract surgery performed on >=65 yr**
- **384,000 operations in England during 2019-20**

Source:
Atlas of variation in risk factors and health care for vision in England. OHID 2021

Variations ….. Inequalities ….. Disparities

- **Health care variations are widespread** …… but are they warranted or unwarranted?
  - equitable availability and access to health services,
  - how they are being used and if they are being used equitably

- **Inequalities - now an explicit NHS priority**
  - Statutory and national requirements for NHS provider organisations (Hospitals) for board level reporting on inequalities

- **Traditionally** “numbers” to demonstrate quality of care and performance measures for throughput & productivity …….…… not
  - WHO is receiving this care?
  - Is it disproportionately distributed amongst patient groups, locations etc?

We are Asking

are these the *Right NUMBERS*?

- is it appropriate activity? too much? too little?

are these the *Right PEOPLE*?

- who are the patients making up these numbers?
- who are we not seeing?
- do we have the right workforce to provide care?

are these the *Right SOLUTIONS*?

- what is the impact of what we do and what we change?

Our Approach ……

- ***Systematic and sustainable, to concurrently report on –***
  - activity / performance - *operational*
  - quality / safety - *clinical*
  - disparities in service provision and outcomes - *public health*

- ***Generating new information from existing*** **data sources and data arising from direct patient care and service delivery to inform planning and service improvement**

- **Analytical and Reporting Framework**
  - routine operational indicators for activity and performance also presented by contextual indicators
  - identify any disparities which may otherwise be masked by routine "headline" operational reporting

What can we do for you?

- Re-assurance on how we are holding and using your data if you are a patient at Moorfields?
- How would you like ***us*** to use your data?
- How would ***you*** like to use your data?
- What questions would you like us to ask about our services and quality of care?

- *Reporting on variations and inequalities* ……
  Do these data matter if we are getting through the numbers ? **YES IT DOES !**